

**EXHIBIT A**

Providing Insurance and Financial Services  
Home Office, Bloomington, IL



RECEIVED:

May 13, 2015

MAY 18 2015

Michael Kennedy  
City Solicitor's Office  
3rd Floor, City Law Department  
414 Grant St  
Pittsburgh PA 15219

State Farm Claims  
PO Box 106117  
Atlanta GA 30348-6117

CITY OF PITTSBURGH  
LAW DEPARTMENT

**CERTIFIED MAIL: RETURN RECEIPT REQUESTED**

RE: Claim Number: 38-1T42-176  
Date of Loss: November 13, 2012  
Our Insured: Leon C Ford

Dear Mr. Kennedy:

As we discussed, State Farm is the owner of 2006 Infiniti G35x, VIN NKCV51F46M616802. Robert Schupansky of District Attorney's office in Pittsburgh, advised you are the contact person to gain access to the vehicle. I have enclosed a copy of Certificate of Salvage, documenting ownership of the car.

You had indicated the criminal trial has been concluded and the police hold has been lifted. In light of this, I would like to take possession of the vehicle. State Farm is the rightful owner of the car and our company policy is to sell our salvaged vehicles at auctions. Should the city of Pittsburgh be interested in purchasing the car, I can provide you with the name of the salvage auction and you can make arrangements to purchase the vehicle at the auction. I have discussed your offer to purchase the salvage directly from State Farm with my supervisor and we must decline and follow through with our auction method of disposing of salvage.

I would appreciate your cooperation in disclosing the location of our property, so I can take steps in taking possession of our property. Please respond to this communication by May 27, 2015.

38-1T42-176

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May 13, 2015

Sincerely,

Pat Noone CPCU®  
Claim Representative  
(888) 713-4694 Ext. 6103615881

State Farm Mutual Automobile Insurance Company

**COMMONWEALTH OF PENNSYLVANIA**

**CERTIFICATE OF SALVAGE FOR A VEHICLE**

REGISTRATION NOT TO BE ISSUED 3230773

133390397001410-001

JNKC5V51F46M616802	2006	INFINITI	67853838603-ST
VEHICLE IDENTIFICATION NUMBER		YEAR	MAKE OF VEHICLE
SDN	XX	XXX	12/05/13 053000
BODY TYPE	DUP.	SEAT CAP	PRIOR TITLE STATE
01/04/10	12/05/13	XXXXXX	ODOM. PROD. DATE
DATE PA TITLED	DATE OF ISSUE	UNLADEN WEIGHT	ODOM. MILES
		XXXXXX	ODOM. STATUS
		GWR	GWR
			TITLE BRANDS

NOT ACTUAL MILEAGE

• ANTIQUE VEHICLE • CLASSIC VEHICLE • COLLECTIBLE VEHICLE • DOT OF COUNTRY • CRIMINALLY TITLED FOR NONROAD • DISTRIBUTION • AGRICULTURAL VEHICLE	TITLE BRANDS	• CONCEDED VEHICLE • IS WAS A POLICE VEHICLE • RECONSTRUCTED • STREET ROD • RECOVERED THEFT VEHICLE • VEHICLE CONTAINS RESTORED VIN • FLOOD VEHICLE • IS WAS A TAXI	ODOMETER STATUS
• ACTUAL MILEAGE • MILEAGE EXCEEDS THE MECHANICAL LIMITS • NOT THE ACTUAL MILEAGE • NOT THE ACTUAL MILEAGE-Odometer tampering verified • EXEMPT FROM ODOMETER DISCLOSURE			

IMPORTANT NOTICE - FORM MV-426B MUST BE USED WHEN APPLYING FOR A "RECONSTRUCTED" PENNSYLVANIA CERTIFICATE OF TITLE. THIS SALVAGE VEHICLE MAY NOT BE OPERATED ON THE HIGHWAY UNTIL A "RECONSTRUCTED" TITLE IS ISSUED.

SALVAGE VEHICLE OWNER(S)

568000  
STATE FARM MUTAL  
AUTOMOBILE INSURANCE  
COMPANY  
1 STATE FARM DRIVE  
CONCORDVILLE PA 19339

06 INFI G35 AWD  
3230773 S 381T42176 026

BARRY J. SCHOCH, P. E.

 I certify as of the date of issue, the official records of the Pennsylvania Department of Transportation reflect that the person(s) or company named herein is the lawful owner of the said salvage vehicle.

Secretary of Transportation

3430070

STORE IN A SAFE PLACE. IF LOST APPLY FOR A DUPLICATE. ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE.

## TYPE OR PRINT ALL INFORMATION

## WARNING

FEDERAL AND STATE LAWS REQUIRE THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.

## A: ASSIGNMENT OF SALVAGE

I We certify, to the best of my/our knowledge that the odometer reading is  
 REFLECTS THE ACTUAL MILEAGE  
 REFLECTS THE ACTUAL MILEAGE TENTHS  
 REFLECTS THE ACTUAL MILEAGE HUNDRETHS  
 REFLECTS THE ACTUAL MILEAGE THOUSANDTHS  
 REFLECTS THE ACTUAL MILEAGE IN EXCESS OF ITS MECHANICAL LIMITS  
 Is NOT the actual mileage  
 unless one of the following boxes is checked:  
 We further certify that vehicle ownership is hereby transferred to the person(s) listed

LAST	FIRST	MIDDLE NAME
PURCHASER OR FULL BUSINESS NAME		
CO-PURCHASER		
STREET ADDRESS		
CITY		
STATE	ZIP	PURCHASE PRICE OR DUE

SIGNATURE OF SELLER

PURCHASER SIGNATURE

SIGNATURE OF CO-SELLER

CO-PURCHASER SIGNATURE

SELLER AND/OR  
CO-SELLER MUST  
HANDPRINT NAME HEREPURCHASER AND/OR  
CO-PURCHASER MUST  
HANDPRINT NAME HERE

## B. RE-ASSIGNMENT OF SALVAGE BY A PERSON/REGISTERED DEALER OR SALVOR

I We certify, to the best of my/our knowledge that the odometer reading is  
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PURCHASER SIGNATURE

SIGNATURE OF CO-SELLER

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STREET ADDRESS		
CITY		
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SIGNATURE OF SELLER

PURCHASER SIGNATURE

SIGNATURE OF CO-SELLER

CO-PURCHASER SIGNATURE

SELLER AND/OR  
CO-SELLER MUST  
HANDPRINT NAME HEREPURCHASER AND/OR  
CO-PURCHASER MUST  
HANDPRINT NAME HERE

## C. CHECK HERE TO INDICATE IF APPLYING FOR:

- A NEW CERTIFICATE OF SALVAGE FOR THIS VEHICLE - NO FEE OR NOTARIZATION REQUIRED
- A RECONSTRUCTED VEHICLE TITLE - ATTACH AND COMPLETE FORM MV-426B WITH APPROPRIATE FEES
- A FLATTENED, CRUSHED OR PROCESSED VEHICLE STATUS - COMPLETE SECTION D BELOW - NO FEE REQUIRED

## D. SALVAGE DEALER/SCRAP PROCESSOR REPORT OF THE VEHICLE BEING FLATTENED, CRUSHED OR PROCESSED

I, the last Pennsylvania Salvage Dealer/Scrap Processor Business listed above, hereby certify that the vehicle described on the front of this certificate has been flattened, crushed, or processed to the extent that it is no longer identifiable as a vehicle and shall not be retitled or reconstructed.

DATE FLATTENED, CRUSHED OR PROCESSED

SIGNATURE OF SALVAGE DEALER/SCRAP PROCESSOR

DATE

MV-5 (8-07)

Providing Insurance and Financial Services  
Home Office, Bloomington, IL



June 11, 2015

Michael Kennedy  
City Solicitor's Office 3rd Floor, City Law  
Department 414 Grant St Pittsburgh PA 15219

State Farm Claims  
PO Box 106117  
Atlanta GA 30348-6117

RECEIVED

JUN 15 2015

CITY OF PITTSBURGH  
LAW DEPARTMENT

**CERTIFIED MAIL: RETURN RECEIPT REQUESTED**

RE: Claim Number: 38-1T42-176  
Date of Loss: November 13, 2012  
Our Insured: Leon C Ford

Mr. Kennedy:

I have attached a copy of my May ,13, 2015 letter and I have not received a response from you. I have called and left phone messages for you. Please provide me with the address where the vehicle is located, so I can arrange pickup.

Sincerely,

Pat Noone CPCU®  
Claim Representative  
(888) 713-4694 Ext. 6103615881

State Farm Mutual Automobile Insurance Company

Enclosure: Copy of May 13, 2015 letter